								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR									1					
	· · · · · · · · · · · · · · · · · · ·		09/832966											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY ·	OR	OTHER SMALL			
TC	TAL CLAIMS				ı.* •: ••• :			RATE	FEE] · · ·	RATE	FEE		
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FI	SE 385.00	OR	BASIC FEE	770.00		
то	TAL CHARGEA	BLE CLAIMS	minus 20=		•			XS 9=		OR	X\$18=			
INDEPENDENT CLAIMS			minus 3 =		•			X43=		OR	X86=			
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				+145=		OR	+290=				
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II										-	OTHER			
	6-9-05	(Column 1)	1 ·· · · · · · ·	(Column 2) (Column 3)					ENTITY	OR	SMALL			
AMENDMENT A	D	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 6	Minus	.** ~	22	=		X\$ 9=		OR	X\$18=			
	Independent	. 2	Minus	***	4	= / ፣	·	X43=	-	OR	X86=	: 7 m= .		
FIRST PRESENTATION OF MULTIPLE DEPENDENT(CLAIM							+145=		OR	+290=				
								TOTA		OR	TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)								ADDII. I L						
ENT/8	E	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	ST BER USLY:	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MO	Total		Minus	**)_	=		X\$.9=.		OR	X\$18=			
AMENDM	Independent	*	Minus	erere d	4	=		X43=	·	OR	X86=			
Δ_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		 OR	+290=			
					•		L	TOTAL		OR	TOTAL ADDIT. FEE	-		
(Column 1) (Column 2) (Column 3)								:	-			· · ·		
AMENDMENT @	F	CLAIMS REMAINING AFTER A' ENDMENT		HIGHI NUME PREVIO PAID 1	EST BER USLY	PRESENT. EXTRA	. [RATE	ADDI- TIONAL FEE		PATE"	ADDI- TIONAL FEE		
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=		X43 ₌ _		OR	X86=			
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								F1F1.71 E		1200-	71 HIVELIN		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							L	+145=		OR	+290= TOTAL			
**	** If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."							DOIT. FEE			ADDIT. FEE			
•	The "Highest Num	ber Previously Pai	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

Consta Congression Assessment

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09/832 966											66		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER TH					
TOTAL CLAIMS			19				1	RATE	FEE	1	RATE	FEE -	
FOR			NUMBER	FILED	NUMBER EXTRA			Basic Fee	355.00	OR	BASIC FEE	710.00·	
TOT	AL CHARGEA	BLE CLAIMS	19 min	us 20=	•	Ø		X\$ 9=		OR	X\$18=		
INDE	PENDENT CL	AIMS	4 mi	nus 3 =				X40=	 -		X80⇒	01	
MUL	TIPLE DEPEN	DENT CLAIM P	RESENT					9	 	OR		80	
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR	+270=	290	
								TOTAL		OR	TOTAL	790	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BEA	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	-21-	Minus	. 0	20	- /		X\$.9= _		OR	X\$18=	\$ 18	
	Independent	. 4	Minus	200	4	= —		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT/CLAIM							+135=	<u> </u>		+270=	•	
								TOTAL	<u> </u>	OR		0.10	
سے	-19-04.	· · · · · · · · · · · · · · · · · · ·	İ.	: :	3\	(Column 3)		ADDIT. FEE	<u> </u>	IOH.	TOTAL ADÖIT, FEE		
	1-1	(Column 1)		High	min 2) (ESY		li	.	ADDI-		·	ADDI-	١.
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE	·	RATE	TIONAL FEE	
Q W	Total	. 27	Minus .		5/	- /		X\$ 9=		OR	X\$18=	418	İ
ME	independent	. 4	Minus	***	4	=		X40=		ÒR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405				,	
	1	•			i^{-1}			+135=		OR	+270=	5 / 27	ŀ
.,		, ,						TOTAL ADDIT. FEE		OR	ADDIT. FEE	4/8	
13	23-04	(Column 1)			mn 2) IEST	(Column 3)	١.						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUA PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total,	. 16	Minus	•• /	71	= /		-X\$ 9=	_	OR	X\$18=		
PE .	Indépendent	. 4	Minus	***	4	- /		X40=	·	OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=					
it the entry in column 1 is tess than the entry in column 2, write "O" in column 3.										OR.	.+270=		
"If the entry in column 1 is tess than the entry in column 2, write " if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.													

Application or Docket Number